## Ask BPM

**Q:** What is the process if a patient makes a board complaint?

**A:** All complaints go to the Medical Board (MBC) Central Complaint Unit and are handled by Medical Board personnel. Most complaints go directly there. The few coming to BPM's suite are just re-routed there. Mr. Ian McGlone has been the Central Complaints desk officer handling DPM complaints for some years. He is professional and helpful to all parties.

Ian closes many complaints for a lack of merit or jurisdiction, but will send to a Medical Board investigator if indicated. If the complaint appears to involve quality or standard of care, Ian has it reviewed by one of BPM's DPM medical consultants in consultation with BPM Enforcement



Coordinator Bethany DeAngelis. Neither Ian nor anyone at BPM is a physician so we do not review medical issues.

Our consultants also close many cases as clearly not below standard of care. But if there seems a legitimate question the investigator will gather the medical records for a review by one of our DPM expert reviewers. Under current law, cases are co-assigned to a Deputy Attorney General (DAG) who helps guide the investigator's work up of the case and interviews with the doctor and other witnesses. If the consultant, expert, investigator, the investigator's supervisor, and the DAG all agree the case should be referred to the AG for preparation of an Accusation, it

goes. At that point, upon referral, the case becomes public information.

Once it is public, we alert the Board Members so they can avoid any *ex parte* communication (jury tampering) with *any* party that would disqualify them from voting on approval of an Administrative Law Judge's proposed decision or an out-of-court settlement (stipulated agreement) between the parties.

The Medical Board has well-developed standard operating procedures for handling the myriad of different types of cases, and there will be some variation depending on the nature of the case. Each is unique and complex. BPM "uses the system" and instructs the MBC and AG to go by the book using the same procedures it does for MDs. Our Enforcement Coordinator assists all the State personnel and works to expedite each case.

## Briefly . . .

How does the Board protect truth in advertising to patients? Given its lack of staff, MBC investigates mostly patient harm cases. It is pursuing unlicensed practice of medicine, including non-physicians advertising or performing podiatric or other medical services.

If I have a patient with a tibial/fibular fracture, at what level of the limb does it become out of scope? You know it when you see it. BPM interprets surgical treatment of the ankle to include "those parts of the tibia, fibula, their malleoli and related structures as indicated by the procedures." This is not an area of complaints. Use your professional judgment.